



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 7274

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT   | ATTORNEY DOCKET<br>NO.                                       |              |                    |
|--|---|--|------------------|--|--------------|--------------------|
| 10/587,168   | 07/25/2006<br>RULE  | 052  | 3633             | 293260US6PCT   |              |                    |
| <b>APPLICANTS</b><br>Christian Eckelt, Steyr, AUSTRIA;<br>Roland Leopoldseder, St Valentin, AUSTRIA;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/FR05/50042 01/25/2005<br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 102004003960.7 01/27/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>02/15/2007 |   |  |                  |  |              |                    |
| Foreign Priority claimed   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS  | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119(a-d) conditions met   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Met after Allowance | AUSTRIA          | 2  | 23           | 1                  |
| Verified and Acknowledged  | /OMAR F. HUAZ/<br>Examiner's signature  |  |                  |  |              |                    |
| <b>ADDRESS</b><br>OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, P.C.<br>1940 DUKE STREET<br>ALEXANDRIA, VA 22314<br>UNITED STATES  |   |  |                  |  |              |                    |
| <b>TITLE</b><br>Device for assembling laminated glass panes  |   |  |                  |  |              |                    |
| <b>FILING FEE RECEIVED</b><br>1050   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                  | <input type="checkbox"/> All Fees                            |              |                    |
|  |   |  |                  | <input type="checkbox"/> 1.16 Fees (Filing)                  |              |                    |
|  |   |  |                  | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |              |                    |
|  |   |  |                  | <input type="checkbox"/> 1.18 Fees (Issue)                   |              |                    |
|  |   |  |                  | <input type="checkbox"/> Other _____                         |              |                    |
|  |   |  |                  | <input type="checkbox"/> Credit                              |              |                    |